Approved for use through 7/31/2005, OUR rest popp

PATENT APPLICATION FEE DETERMINATION RECORD  Application of information unless a displayer a valid OMB control number.  Substitute for East Particular of Consular Center of Control number.												
Substitute for Form PTO-875								App		S control muni	严	
l	CLAIMS AS FILED - PART I							<u> </u>	-1-/1	). 1/2		_
1	(Column 1) (Column 2)			_	SMALL ENTITY			OTH Smal	ER THAN L ENTITY			
13	BASIO FEE NUMBER EXTRA			┙	RATE	FEE	1		T-	-		
1	P7 CFR 1,1S(a))  VOTAL CLAIMS							1	٦	RATE	FEE	_
1.5	DT CFR.1.16(c))  MDEPENDENT CLAIMS  MDEPENDENT CLAIMS				7	Xs .	-	→ OR	-	18		
L	37 CFR 1.16(b))				-	× s		OR	X 5 =			
u	TOU CACALINA					4	×3	-	OR	X 4 *		٦
ı									OR	+1 =		٦
	" If the difference in column 1 is less than zero, enter "O" in column 2.						TOTAL		OR	TOTAL	<b> </b>	┨
O On CLAIMS AS AMENDED - PART II												7
K	100	(Column 1)		(Column 2)	(Column 3)	<u>.</u>	SMALL	ENTTY	OR	OTHE	R THAN ENTITY	
		REMAINING	$\sim$	. NUMBER PREVIOUSL	PRÉSENT.	1.	RATE	ADOL	] •	RATE .		1
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Ş	Dr CFA 1.14(ct)	1	4	مليطة		7	×25	—··	:		FEE	4
W	Independent pr cFR 1.15(b)		-17		-	1	100	<del> </del>	OR.	x450	•	1
٧	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(41)						**100		OR	× 200		
D/CRI.相向						] [	+4/80		OR	+.360		7
							ADO'L FEE		OR ·	TOTAL ADD'L FEE		1
_	γ	(Column 1)		(Column 2)	(Cohema 3)		•			WOLLEE !		$\mathbf{H}$
18		REMAINING		HIGHEST NUMBER	PRESENT	) [			1			1
S		AFTER AMENOMENT	. :	PREVIOUSLY PAID FOR	EXTRA	П	RATE	ADONAL TIONAL		RATE	ADD1-	
AMENDMENT	CALCLE LYSICAL		Hires	-	-	ŀ		FEE	l		TIONAL FEE	].
S	Independent OF CFR 1.75(0)	•	Minu	<del> </del>			143		OR	* 50		
A	FRET PROTECTION						<u> </u>		OR	x 100	•. • •	ŀ
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAM (37 CFR 1.16(4))						+180		OR	1.2/1		ŀ
							TOTAL ADD'L FEE		OR L	TOTAL ADDL FEE		
		(Column 1)		(Column 2)	(Column 3)				•			
입		CLAIMS REMAINING		HIGHEST NUMBER	PRESENT	Г	1					
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高	Total CFR 1.15(ch	•	Miras	*	-	H	<del></del>	FEE			TIONAL PEE	
AMENDMENT	Endependent (IF CFR 1.16(vg)	•	Minus	***	-	ŀ	·25		OR L	50.		
₹İ		ATOM OF LOCAL	لببا	1.5.25		42	100		.09	MOOT		
<u></u>	THO THE SOUND FALL TIPLE DEPOIDENT CLASS (27 OFR 1.19(0)							7	OR	.360	-	-
	" If the entry in column 4 is less than the entry is column 2, write, 'V' in options 3. " If the "Highest Number Previously Paid For" M Three space.									TOTAL		***
••	If the "Highest N	turns T is less that tumber Previous	n the anny Paid For	in column 2, will M THIS SPACE I	. TÇ în apiyan î. Li laxis Ban 20 e	~ ~	OON FEE		OR ,	COLFEE		

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The Highest Number Previously Paid For Bi THIS SPACE is less than 20, enter "20".

The Highest Number Previously Paid For Bi THIS SPACE is less than 3, enter "2".

The Highest Number Previously Paid For (Ictal or Independent) is the highest number found in the appropriate box in column 1,

This collection of Information is required by 37 CFR 1.16. The information is required to attain or retain a benefit by the public which is to tile (and by the studied) appropriate, and studied in the property, and submitting the completed application form to the USPTO. Time will vary depending upon the individual state form and/or suggestions for neducing this bandon, strough one on the Chief Information Office, U.S. Department of Comments, P.O. Box 1450, Alexandria, VA 22313-1450, DO HOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patenta, P.O. Box 1450, Alexandria, VA 22313-1450.